Effective January 1, 2003 CLAIMS AS FILED - PART I

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

10/656040

(Column 1) (Column 2)								SMALL ENTITY		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			19				ſ	RATE	FEE) 	RATE	FEE
FOR			NUMBER FILED		NUMBI	UMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			7 minus 3 =		* 4			X42=		OR	X84=	1776
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT	ESENT				+140=		OR	+280=	
* H	the difference	in column 1 is	ess than zero, enter "0" in co			olumn 2	•	TOTAL		OR	TOTAL	1050
	C	LAIMS AS A	MENDED - PART II			SMALL ENTITY			•	OTHER THAN SMALL ENTITY		
		(Column 1)		(Colui		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVI	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE_
MON	Total	. 19	Minus	** 2	70	- /		X\$ 9=		OR	X\$18=	
AME	Independent	* 5 INTATION OF M	Minus	PENDEN	T CLAIM			X42=		OR	X84=	
	THOS PHESE	MIANOR OF W	OEIII CE DE	I CITOLIT	COCAIN			+140=		OR	+280=	
								TOTAL		OR	TOTAL ADDIT, FEE	7
ADDIT. FEE											ADDII. FEE	
		(Column 1) CLAIMS			HEST	(Column 3)	1		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER HOUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NON	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	PENDEN	T CLAIM			X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
47,14.								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
o		CLAIMS REMAINING			HEST MBER	PRESENT	lı		ADDI-			ADDI-
AMENDMENT C		AFTER AMENDMENT		PREV	OUSLY FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	l	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un.		
	If the eater in eat-	uma 4 la lace these	the ester in	duma A	to 802 :	duma 2		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
"		umber Previously Pa mber Previously Pa					er fo	und in the ap	propriate bo	x in cc	dumn 1.	